

State of Wisconsin
Department of Workforce Development
Equal Rights Division

Request to Withdraw Complaint

Authorization for this form is provided under Section 111.375, Wisconsin Statutes.

Completion of this form is voluntary. However, if you wish to file a withdrawal of a discrimination complaint with the Equal Rights Division, you must submit a written document containing the information sought by this form. Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04(1)(m), Wisconsin Statutes].

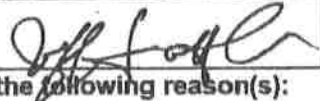
Complainant	
First Name	Nathan
Middle Name	
Last Name	Poke
Street Address	7400 2nd Ave. S. Richfield
City	Richfield
State	MN
Zip Code	55423

Respondent	
Respondent Name	City of La Crosse
Street Address	00 La Crosse St., 2nd Floor
City	La Crosse
State	WI
Zip Code	64601

I wish to withdraw my discrimination complaint against the above named respondent(s) filed with the:

<input checked="" type="checkbox"/> Department of Workforce Development Equal Rights Division	(ERD) Case Number CR201804903
<input type="checkbox"/> U.S. Equal Employment Opportunity Commission	(EEOC) Case Number
<input type="checkbox"/> City of Madison Equal Opportunities Commission	(MEOC) Case Number

I have been advised that under state, federal and local laws it is unlawful for any person to threaten, intimidate or harass me because I have filed a complaint.

Signature Jeff Scott Olson 	Date Signed September 10, 2018
I make this request for the following reason(s): The Complainant asks to be permitted to withdraw his case before the Equal Rights Division with prejudice to all further Fair Employment Act claims but without prejudice to any and all claims under federal law in order to be free to pursue his claims in court under federal law.	

Send Completed form to:

☒ THE EQUAL RIGHTS DIVISION
201 E WASHINGTON AVE - ROOM A300
PO BOX 8928
MADISON WI 53708

☐ THE EQUAL RIGHTS DIVISION
819 N 6TH ST
ROOM 255
MILWAUKEE WI 53203